

**CITY OF NEW ORLEANS
CAPITAL BUDGET REQUEST
SUMMARY PAGE**

2024- 2028 Capital Budget Request Form

Request #	Department Ranking	Priority Criteria Ranking	Project Name	Project Amount	2024	2025	2026	2027	2028
1	1	54	Taxiway Sierra Reconstruction	\$14,720,000.00	\$8,000,000.00	\$6,720,000.00			
2	1	54	North/South Connector Road	\$118,000,000.00	\$30,000,000.00	\$38,000,000.00	\$50,000,000.00		
3	1	54	Intermodal Infrastructure Program - Phase I	\$25,000,000.00	\$2,000,000.00	\$10,000,000.00	\$13,000,000.00		
4	1	54	BHS /CBIS Expansion	\$36,318,269.00	\$13,000,269.00	\$6,400,000.00	\$16,918,000.00		
6	1	54	Terminal / Concourse Program - Phase I	\$90,000,000.00	\$5,000,000.00	\$12,000,000.00	\$35,000,000.00	\$38,000,000.00	
7	1	54	North Terminal Apron Expansion	\$9,418,500.00	\$1,425,000.00	\$7,993,500.00			
8	1	54	Storm Water Pump Station Expansion	\$22,000,000.00		\$8,500,000.00	\$13,500,000.00		
9	1	54	Cooling Tower Enhancement	\$2,000,000.00		\$2,000,000.00			
10	1	54	Water Quality Enhancement	\$2,875,000.00	\$2,875,000.00				
12	1	54	Inbound Elevated Roadway Improvements	\$2,300,000.00	\$2,300,000.00				
13	1	54	Blue Water Facility Force Main	\$8,050,000.00	\$8,050,000.00				
14	1	54	Airfield Rehabilitation Program - Phase I	\$75,000,000.00		\$15,000,000.00	\$25,000,000.00	\$35,000,000.00	
15	1	54	Wayfinding Improvements - South Campus	\$1,725,000.00	\$1,725,000.00				
16	1	54	Landside / Roadways Construction Program - Phase I	\$50,000,000.00		\$15,000,000.00	\$17,000,000.00	\$18,000,000.00	
17	1	54	South Terminal Redevelopment	\$20,240,000.00		\$10,000,000.00	\$5,120,000.00	\$5,120,000.00	
18	1	54	Airfield Rehabilitation Program - North GA Ramp	\$7,725,000.00					\$7,725,000.00
19	1	54	Technology Infrastructure & Equipment Upgrade	\$2,000,000.00		\$500,000.00	\$500,000.00	\$500,000.00	\$500,000.00
TOTAL				\$487,371,769.00	\$74,375,269.00	\$132,113,500.00	\$176,038,000.00	\$96,620,000.00	\$8,225,000.00

Department Head Signature

Kevin Dolliole
2-17-23

Printed Name

Kevin Dolliole, Director of Aviation

Date

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Taxiway Sierra Reconstruction	Department Priority Ranking	1
Project Type	Blank	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Taxiways Sierra will be milled and overlaid, plus concrete slab removal and replacement to maintain airfield safety in compliance with FAA airfield pavement requirements		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 14,750,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.	No		
What Benefit(s) will be provided to Public from this project?	Airfield Safety	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$8,000,000.00
		2025	\$6,720,000.00
		2026	\$0.00
		2027	\$0.00
		2028	\$0.00
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Taxiway Sierra Reconstruction	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to adopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Energy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form

Agency Number	900	Department Name	Aviation
Project Name	North/South Connector Road	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	MSY North-South Connector Road project will build a pile-supported road on Airport property to facilitate shuttling between north and south campuses without interfacing with potential traffic delays on public roadways.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 118,000,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Plan for future growth of airport to meet the needs of the travelling public	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ 30,000,000.00
		2025	\$ 38,000,000.00
		2026	\$ 50,000,000.00
		2027	
		2028	
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	North/South Connector Road	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Intermodal Infrastructure Program	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	MSY planning Intermodal Center Station and Automatic People Mover (APM) system Project will provide a transit stop to connect Inter City Rail to transit, light rail, and Airport Terminal. The goal would be to connect the north and south sides of the Airport with an to replace the current busing solution in place around the eastern boundary of the Airport.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 25,000,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds, FRA Funding, CFC's
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Plan for future growth of airport to meet the needs of the travelling public	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ 2,000,000.00
		2025	\$ 10,000,000.00
		2026	\$ 13,000,000.00
		2027	
		2028	
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Intermodal Infrastructure Program	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	BHS/CBIS Expansion	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	The Checked Baggage Inspection System (CBIS) will be expanded to accommodate two additional Explosive Detection System (EDS) machines and four additional checked baggage inspection tables. The project includes a 5,000 square foot addition to the North Terminal, reconfiguring of the existing program within the building, and associated utility relocations.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 36,318,269.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Plan for future growth of airport to meet the needs of the travelling public	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ 13,000,269.00
		2025	\$ 6,400,000.00
		2026	\$ 16,918,000.00
		2027	
		2028	
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	BHS/CBIS Expansion	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Terminal / Concourse Program - Phase I	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Due to increasing passenger demand and future passenger forecasts, additional Terminal and Concourse space will become necessary along with connecting the current Long-term Garage via pedestrian bridge and improvements to the Arrivals Curb area.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 90,000,000.00	Proposed Funding Source	Airport Local Funds, Bonds, Passenger Facility Charges
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Plan for future growth of airport to meet the needs of the travelling public	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ 5,000,000.00
		2025	\$ 12,000,000.00
		2026	\$ 35,000,000.00
		2027	\$ 38,000,000.00
2028			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Terminal / Concourse Program - Phase I	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form

Agency Number	900	Department Name	Aviation
Project Name	North Terminal Apron Expansion	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	This public work consists of expanding existing apron to expand RON parking and GSE capacity.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 9,418,500.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Airfield Safety	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ 1,425,000.00
		2025	\$ 7,993,500.00
		2026	
		2027	
		2028	
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	North Terminal Apron Expansion	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Storm Water Pump Station Expansion	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	With expansion of the terminal and concourse facilities at MSY, additional runoff mitigation efforts are anticipated. To account for additional runoff from developed land, additional storm water pumping capacity is assumed to be required for the existing pump station. Additional pumps, controls, discharge pipe and foundation work is expected.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 22,000,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Airfield Safety	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ -
		2025	\$ 8,500,000.00
		2026	\$ 13,500,000.00
		2027	
2028			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Storm Water Pump Station Expansion	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form

Agency Number	900	Department Name	Aviation
Project Name	Cooling Towers Enhancement	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	To increase resiliency and capacity of the cooling towers, additional pumping systems will need to be added to the cooling tower site.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 2,000,000.00	Proposed Funding Source	Airport Local Funds, Bonds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.		
	2024	\$	-
	2025	\$	2,000,000.00
	2026		
	2027		
	2028		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Cooling Towers Enhancement	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Water Quality Enhancement/Universal Water Softener	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Since opening, the need for the water softeners has been established as excessive wear is occurring to the equipment because of the hard water. This project includes a centralized softener at the incoming water supply and a centralized softener located outside of the CUP piped to condition water to each boiler.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 2,875,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.		
	2024	\$	2,875,000.00
	2025		
	2026		
	2027		
2028			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Water Quality Enhancement/Universal Water Softener	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Inbound Roadway / Elevated Slab	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	The roadway transition from the pile supported elevated roadway to the surface level roadway is in need of repair because of uneven settlement and the constructed design.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 2,300,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Passenger/Public Safety	For what year are you requesting the Project? 2022, 2023, 2024, 2025 and 2026? Enter amount in requested year below.	
		2024	\$ 2,300,000.00
		2025	
		2026	
		2027	
2028			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Inbound Roadway / Elevated Slab	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Blue Water Facility	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Additional sewer enhancements are necessary to increase reliability and capacity of the combined Blue Water / Airfield Lighting Vault gravity system.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 8,050,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Passenger/Public Safety	For what year are you requesting the Project? 2022, 2023, 2024, 2025 and 2026? Enter amount in requested year below.	
		2024	\$ 8,050,000.00
		2025	
		2026	
		2027	
2028			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Blue Water Facility	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Airfield Rehabilitation Program	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	As the Runways and Taxiways approach the end of its useful life, the Airport will design and reconstruct its airfield infrastructure to maintain airfield safety in compliance with FAA airfield pavement requirements.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 75,000,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds, & Passenger Facility Charges
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.	No		
What Benefit(s) will be provided to Public from this project?	Airfield Safety	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ -
		2025	\$ 15,000,000.00
		2026	\$ 25,000,000.00
		2027	\$ 35,000,000.00
2028			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Airfield Rehabilitation Program	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Wayfinding Improvements - Southside	Department Priority Ranking	1
Project Type		Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	This project consists of improving wayfinding signage throughout the North and South campuses. The existing wayfinding signage designed and installed with the North Terminal project appears to be inefficient with directing the traveling public to their destinations. Improvements to signage, wording, locations and graphics will greatly improve the experience of the traveling public.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,725,000.00	Proposed Funding Source	Airport Local Funds, Passenger Facility Charges, Bonds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.	No		
What Benefit(s) will be provided to Public from this project?	Public/Passenger Safety & Improvement	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ 1,725,000.00
		2025	\$ -
		2026	\$ -
		2027	\$ -
2028	\$ -		
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Wayfinding Improvements - Southside	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Landside / Roadways Construction Program	Department Priority Ranking	1
Project Type	Construction	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	With increased passenger traffic and the integration of the vehicle flyover road, improvements to the landside roadways are required. In addition, improvements to the CONRAC Facility will be required.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 50,000,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Passenger Safety	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ -
		2025	\$ 15,000,000.00
		2026	\$ 17,000,000.00
		2027	\$ 18,000,000.00
		2028	\$ -
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form			
Agency Number	900	Department Name	Aviation
Project Name	Landside / Roadways Construction Program	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to adopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Energy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form

Agency Number	900	Department Name	Aviation
Project Name	Southside Redevelopment	Department Priority Ranking	1
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	The "Former Terminal Area," is the area currently occupied by LANOIA's existing passenger terminal on the south side of the airfield and will be vacated when commercial passenger operations move to the new terminal being developed on the north side of the airfield. Initial planning consistent with FAA requirements identified aviation uses for the site, such as maintenance, repair, and overhaul (MRO) facilitates and other aeronautical uses.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 9,000,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	The ability to provide for repurposing of the site for aviation and aeronautical uses in compliance with FAA requirements.	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ -
		2025	\$ 10,000,000.00
		2026	\$ 5,120,000.00
		2027	\$ 5,120,000.00
		2028	\$ -
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Southside Redevelopment	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form

Agency Number	900	Department Name	Aviation
Project Name	Airfield Rehabilitation Program - North Ramp	Department Priority Ranking	1
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	Yes	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Project will provide for continued integrity of airfield ramp pavement and allow the Airport to maintain compliance with FAA requirements.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 7,725,000.00	Proposed Funding Source	Federal Grants, State & Local Airport funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Airfield Safety	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	
		2025	
		2026	
		2027	
		2028	\$ 7,725,000.00
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Airfield Rehabilitation Program - North Ramp	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	

Capital Budget Request Form

Agency Number	900	Department Name	Aviation
Project Name	Technology Infrastructure & Equipment Upgrades	Department Priority Ranking	1
Project Type	Equipment	Is a Land acquisition needed? (Y/N)	No
Will this project be a permanent immovable improvement?	No	Does the request meet the General Obligation Bond requirement?	
Project Address	Louis Armstrong New Orleans International Airport	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	This Project will install new network and email servers and other necessary technology equipment and software to replace, enhance performance, and improve network security for the Airports aging IT infrastructure.		
Five Year Summary			
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 2,000,000.00	Proposed Funding Source	
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
Does the project improve runoff water quality or reduce the impacts of flooding? If yes, please explain how this is achieved, describing the area that is impacted. If no, please describe any negative impacts, and the area impacted.			
What Benefit(s) will be provided to Public from this project?	Terminal Enhancements	For what year are you requesting the Project? 2024, 2025, 2026, 2027 or 2028? Enter amount in requested year below.	
		2024	\$ -
		2025	\$ 500,000.00
		2026	\$ 500,000.00
		2027	\$ 500,000.00
		2028	\$ 500,000.00
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Priority Rating Form

Agency Number	900	Department Name	Aviation
Project Name	Technology Infrastructure & Equipment Upgrades	Department Priority Ranking	1
Categories	Rating	Score	
Public Health and Safety	1	3	
External Requirements	1	3	
Protection of Capital Stock	1	3	
Economic Development	1	3	
Operating Budget	1	3	
Life Expectancy of Project	1	3	
Percent of Population Served by Project	1	3	
Relation to dopted Plans	1	3	
Intensity of Use	1	3	
Scheduling	1	3	
Benefit/ Cost	1	3	
Potential for Duplication	1	3	
Availability of Financing	1	3	
Special Need	1	3	
Entergy Consumption	1	3	
Timeliness/ External	1	3	
Public Support	1	3	
Environmental Quality and Stormwater Management	1	3	
TOTAL Ranking	18	54	